



STATE  
OF  
GEORGIA

# Application for RECORDS DISPOSITION STANDARD

OFFICE OF SECRETARY OF STATE  
DEPARTMENT OF ARCHIVES & HISTORY  
RECORDS MANAGEMENT DIVISION

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1. Application Date <b>June 25, 1974</b>	<b>INSTRUCTIONS</b> See separate instructions for completion of front and reverse of this form. Sign original and two copies and forward to Department of Archives and History, Attention: Records Management Officer.	FOR RECORDS MANAGEMENT DIVISION USE		
2. Agency Application No.		Date Received <b>JUN 25 1974</b>	Application No. <b>74-258</b>	Date Completed <b>JUL 25 1974</b>
3. AGENCY, Division, Subdivision & Administering Office Address <b>Department of Community Development Industry Division 602 Trinity-Washington Building Atlanta, Georgia 30334</b>		4. Person to Contact <b>Delta Daniel</b>		
		5. Working Title <b>Secretary III</b>	6. Tel. No. <b>656-3599</b>	

7. ACTION REQUESTED

☒ ESTABLISH DISPOSITION STANDARD;  
RECORD WILL CONTINUE TO ACCUMULATE. ☐ DISPOSE OF PRESENT ACCUMULATION;  
NO FURTHER ACCUMULATION ANTICIPATED.

8. Earliest & Latest Dates of Series <b>1969 to Date</b>	9. Exact Series Title <b>Industrial Inquiry Files</b>
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10. What is the function of the office in which this record series is created?

The Industry Division is charged with the responsibility of promoting and attracting new industry and business to Georgia. To fulfill this responsibility, the Division Staff follows up on all leads generated from national advertising, industrial development organizations and other sources. The Division informs the industrial prospects of Georgia's advantages in markets, transportation, labor and educational facilities and informs existing industries of facilities that are available to them for expansion.

11. This file contains the following documents (include form numbers and titles, if any, and file arrangement).

Documents relate to Industrial Inquiries in reference to new Industry locating in Georgia. Included are information requests, project work sheets, newspaper articles, Dunn and Bradstreet ratings, contact reports. Files are arranged alphabetically by name of company.

## ATTACH SAMPLES OF THE FILE

EQUIPMENT OCCUPIED		No. of Drawers	Cu. Ft. of Records	ANNUAL RATE OF ACCUMULATION	No. of Drawers		Cu. Ft. of Records	
Letter-size File Drawers		4	0.4		1	1.5		
Legal-size File Drawers				Floor Space Occupied (Square Feet)	In Office(s) 6 sq. ft.			In Storage Area(s)
				AVERAGE DAILY REFERENCE	This Year's	Last Year's	Preceding Year's	All Prior Years
					17	0	0	10

**QUESTIONNAIRE** Place an "x" in the proper column. If answer is "YES," please explain

YES NO

13. Is this the Record Copy of the series? ☒ [ ]
14. Is there a duplication of this series in another office or agency? ☐ [ ] ☒ [ ]
15. Is the information contained in this series ever summarized or published?  
Attach copy of summary or publication. ☐ [ ] ☒ [ ]
16. Does the series contain classified information requiring security handling? ☐ [ ] ☒ [ ]
17. Does the series initiate, amend or terminate agency policies and procedures? ☐ [ ] ☒ [ ]
18. Could the function be performed if the files were lost or destroyed? ☒ [ ] ☐ [ ]
19. Is the series (or major portion of it) regularly microfilmed? If yes, why? ☐ [ ] ☒ [ ]
20. Does the record series provide data as input to an EDP file? ☐ [ ] ☒ [ ]
21. Does the record series contain documentation produced as EDP printout? ☐ [ ] ☒ [ ]
22. Has the Federal Government issued instructions governing the retention/disposition of these files? ☐ [ ] ☒ [ ]
23. Will there be a need for these records 10, 15 years from now? If yes, what? ☐ [ ] ☒ [ ]

24. REQUIREMENTS. The following requires the files to be kept three (3) ~~XXXXX~~ months.

a. ☐ STATE LAW    b. ☐ STATUTE OF LIMITATION    c. ☐ AUDIT PERIOD    d. ☐ FEDERAL LAW    e. ☒ ADMINISTRATIVE DECISION    f. ☐ HISTORICAL VALUE  
(Cite Law, Statute, or other reason for the retention requirement)

25. AGENCY RECOMMENDATIONS. This agency recommends that the file series be cut off at the end of each ☐ CALENDAR YEAR ☐ FISCAL YEAR ☒ OTHER quarterly, then:

- ☐ Hold in the current files area            month(s)/            year(s):
- ☐ Transfer to ☐ State Records Center ☐ Local Holding Area; hold            year(s):
- ☐ Destroy.
- ☐ Transfer to State Archives for permanent retention.
- ☐ Destroy immediately after cut-off.
- ☒ Other: (Specify)

Cut off at the end of every three months; then destroy.

(Indicate briefly rationale for recommendations above/or write additional remarks):

Records Management Officer (Signature)	Date	OTHER REQUIRED SIGNATURES	DATE
<i>James M. White</i>	6/25/74		
26. Recommendations in paragraph 25 are:	Agency Head/Designee <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	<i>John B. Zeland, Asst. Dir.</i>	6-25-74
	State Auditor/Designee <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	<i>William M. Dixon</i>	7-24-74
	Secretary of State/Designee <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	<i>Carroll Hart</i>	7-22-74
	Attorney General/Designee <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	<i>Robert Shue</i>	7-24-74

STATE RECORDS  
COMMITTEE